



## **APPLICATION FOR APPLICANT / EVENT ORGANIZER FOR A MONTGOMERY COUNTY WINE FESTIVAL CLASS C SPECIAL LICENSE**

Application is hereby made by the undersigned, under the provisions of Article 2B, of the Annotated Code of Maryland, as amended, for a Class C, Special License.

**All applications can be mailed in or submitted in person (at least 14 days prior to event) to:**  
Department of Liquor Control, Licensing Office, 16650 Crabbs Branch Way, Room 203, Rockville, MD 20855  
Phone: 240-777-1989 Email: [dlc@montgomerycountymd.gov](mailto:dlc@montgomerycountymd.gov)

**Application fee: \$30 for applicant. \$30 a day for vendor.**

*All major credit cards accepted. Make checks payable to Montgomery County, Maryland.*

### **PLEASE PRINT OR TYPE**

NAME OF EVENT: \_\_\_\_\_

NAME OF APPLICANT: \_\_\_\_\_

APPLICANT ADDRESS: \_\_\_\_\_

APPLICANT PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_

APPLICANT'S EMAIL ADDRESS: \_\_\_\_\_

EVENT ORGANIZER: \_\_\_\_\_

ORGANIZATION PHONE: \_\_\_\_\_

ORGANIZATION EMAIL: \_\_\_\_\_

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TYPE OF EVENT: \_\_\_\_\_

*Please include map of festival*

EVENT WEBSITE: \_\_\_\_\_

DATE(S) OF EVENT: \_\_\_\_\_ RAIN DATE (IF APPLICABLE): \_\_\_\_\_

HOURS OF EVENT: \_\_\_\_\_ HOURS OF ALCOHOL SALES: \_\_\_\_\_

EVENT LOCATION (NAME OF FACILITY & ADDRESS): \_\_\_\_\_

ESTIMATED # OF ATTENDEES: \_\_\_\_\_

INDOOR

OUTDOOR

TYPE OF ENTERTAINMENT: \_\_\_\_\_

HOURS OF ENTERTAINMENT: \_\_\_\_\_

TYPE OF ADVERTISING:

RADIO

FLYER

INTERNET

OTHER: \_\_\_\_\_

*(A copy of invitation, flyer, any promotion associated with this event, must be submitted with this application)*

WILL THE APPLICANT USE SERVICES OF A PROMOTER OR OTHER PERSON TO MANAGE THE EVENT?                      YES                      NO

IF YES, NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ WEBSITE: \_\_\_\_\_

FACEBOOK PAGE: \_\_\_\_\_

FOOD MENU: \_\_\_\_\_

**SECURITY PLAN:** A security plan is required for an event that expects 500 – 1,000 attendees or more daily. The security plan must be attached as part of the application. *(Please attach a copy of the security plan and event layout)*

SECURITY:                      YES                      NO

IF YES, SECURITY COMPANY NAME: \_\_\_\_\_

CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

NUMBER OF SECURITY PERSONNEL PROVIDED AT THIS EVENT: \_\_\_\_\_

**ALCOHOL PLAN:** *All events must submit an alcohol plan. (This can be included in your Security Plan). This plan should include how you will be serving/selling alcohol (bartender, sectioned off beer garden, etc.), who will be checking ID's, how drinks will be sold (tickets, cash bar, etc), if under 21 persons are allowed to attend event, how will they be differentiated between those who are 21 years old and over. IF NEEDED, PLEASE ATTACH A SEPARATE SHEET*

**Vendors who will participate in the Wine Festival Event:**

*(Please list all vendors who have agreed to participate)*

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_
11. \_\_\_\_\_
12. \_\_\_\_\_
13. \_\_\_\_\_
14. \_\_\_\_\_
15. \_\_\_\_\_
16. \_\_\_\_\_
17. \_\_\_\_\_
18. \_\_\_\_\_
19. \_\_\_\_\_
20. \_\_\_\_\_

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OFFICE USE ONLY:  
APPROVAL

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**PROPERTY OWNER NAME:** \_\_\_\_\_

*I hereby certify that I am the property owner, or designated agent, and that the above-named organization is empowered to hold this function on said premises on the date(s) specified*

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Signature of Property Owner

\_\_\_\_\_  
Date

**APPLICANT NAME:** \_\_\_\_\_

*Each of the said applicants hereby certifies further that if the license applied for is granted, he/she will conform to all State and County laws and regulations relating to the sale of alcoholic beverages, as well as to the rules and regulations of the Board of License Commissioners for Montgomery County.*

\_\_\_\_\_  
Signature of Applicant (Notarized)

\_\_\_\_\_  
Date

This certifies that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, the subscriber personally appeared \_\_\_\_\_, the applicant named in the foregoing application for an alcoholic beverage license, who made oath in due form of law that the statements therein contained are true to the best of my knowledge and belief.

\_\_\_\_\_  
Notary Public